

## TELECOPIER COVER SHEET

January 24, 2005

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To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818/493-2251
Attention: Examiner M. Bockelman Art Unit: 3762 TECHNOLOGY CENTER 3700	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 703/872-9306	Telecopier: 818/362-4795
RE: Response to Restriction Requirement	Number of pages being sent: <u>4</u> (including cover page)
Applic. No. 10/071,282 Filed: 02/07/2002 Docket No. A02P1013US01	

PLEASE DELIVER TO EXAMINER BOCKELMAN, ART UNIT 3762. THANK YOU.

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE AND THOSE PROPERLY ENTITLED TO ACCESS TO THE INFORMATION AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, AND/OR EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS TRANSMISSION IS NOT THE INTENDED OR AN AUTHORIZED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY UNAUTHORIZED DISTRIBUTION, DISSEMINATION, OR DUPLICATION OF THIS TRANSMISSION IS PROHIBITED. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE IMMEDIATELY DESTROY IT BY ERASING OR READING IT. THANK YOU!

**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Applicant:** Mark W. Kroll et al.**Serial No.:** 10/071,282**Examiner:** M. Bockelman**Filed:** 02/07/2002**Art Unit:** 3762**Docket No.:** A02P1013US01**For:** SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE TO CONGESTIVE HEART FAILURE USING PHYSIOLOGIC SENSORS**TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING**

Mail Stop Amendment  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- Response to Restriction Requirement  
 Transmittal Letter, Fee and Cert. of Mailing

CALCULATION OF FEES						
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	7	24	0	X \$ 50	\$ 0
B	INDEPENDENT CLAIMS FEE**	1	3	0	X \$200	0
C	MULTIPLE- DEPENDENT				X \$ 360	0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160					0
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.)  Specify:					
F	<b>TOTAL ADDITIONAL FEE**</b> (ADD TOTALS FOR LINES A,B,C,D, and E)					\$0**

Charge Deposit Account No. 16-0068  
the amount of

\$0\*\*

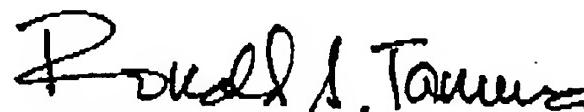
A copy of this letter is  
enclosed.

**PATENT**

- X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068
- X Any additional filing fees required under 37 CFR 1.16.  
X Any patent application processing fees under 37 CFR 1.17.
- X The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
- X Any patent application processing fees under 37 CFR 1.17.  
X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date: 1/24/05

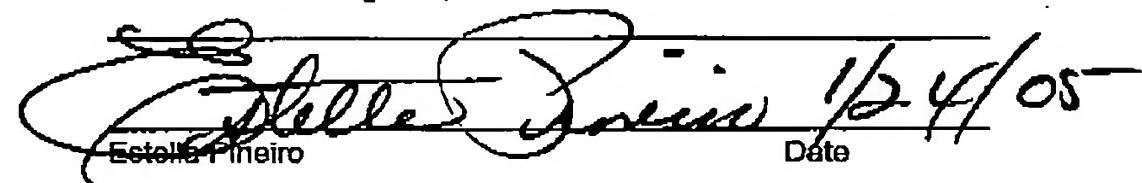


Ronald S. Tamura  
Reg. No. 43,179  
Attorney for Applicants

**CUSTOMER NUMBER: 36802**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

January 24, 2005



Estelle Pineiro Date  
1/24/05

JAN 24 2005

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE**Applicant:** Mark W. Kroll et al.**Serial No.:** 10/071,282**Examiner:** M. Bockelman**Filed:** 02/07/2002**Art Unit:** 3762**Docket No.:** A02P1013US01**For:** SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE TO CONGESTIVE HEART FAILURE USING PHYSIOLOGIC SENSORSRESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendments  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

I hereby certify that this correspondence is facsimile transmitted to the United States Patent and Trademark Office, on:

*Scanned January 24, 2005*  
*Estrella Pineiro 1/24/05*  
 Date

Dear Sir:

In the Restriction Requirement mailed January 13, 2005, the Examiner noted that the reply filed on October 13, 2004 is not fully responsive to the prior Office Action because applicants did not identify which claims read on the elected species. In response thereto, applicants elect Species 1 corresponding to claims 1-7 (a method of calculating VR according to equation 5 of the specification). This election is made without traverse.

Respectfully submitted,

1/24/05

Date

*Ronald S. Tamura*

Ronald S. Tamura  
 Registration No. 43,179  
 Attorney for Applicants

CUSTOMER NUMBER: 36802